

2002 303 (d) List Update  
Ref. #131

Mendocino THP

FOR ADMIN. USE ONLY  
Amendments-date & S or M

**TIMBER HARVESTING PLAN**

FOR ADMIN. USE ONLY

STATE OF CALIFORNIA  
DEPARTMENT OF FORESTRY  
AND FIRE PROTECTION  
RM-63 (01-00)

THP No. 1-01-358 MEN

Dates Rec'd SEP 28 2001

- 1. \_\_\_\_\_ 7. \_\_\_\_\_
- 2. \_\_\_\_\_ 8. \_\_\_\_\_
- 3. \_\_\_\_\_ 9. \_\_\_\_\_
- 4. \_\_\_\_\_ 10. \_\_\_\_\_
- 5. \_\_\_\_\_ 11. \_\_\_\_\_
- 6. \_\_\_\_\_ 12. \_\_\_\_\_

**L N GREENWOOD**

If this is a Modified THP, check box: [ ]

Date Filed \_\_\_\_\_

Date Approved \_\_\_\_\_

Date Expires \_\_\_\_\_

Extensions 1) [ ] 2) [ ]

SECTION I - GENERAL INFORMATION

This THP conforms to my/our plan and upon approval, I/we agree to conduct harvesting in accordance therewith. Consent is hereby given to the Director of Forestry and Fire Protection, and his or her agents and employees, to enter the premises to inspect timber operations for compliance with the Forest Practice Act and Forest Practice Rules.

1. TIMBER OWNER(S) OF RECORD: Name Mendocino Redwood Company, LLC

Address P.O. Box 390

City Calpella State CA Zip 95418 Phone (707) 485-8731

Signature Thomas E. Schuby, Timberlands Mgr Date 9-26-01

2. TIMBERLAND OWNER(S) OF RECORD: Name Mendocino Redwood Company, LLC

Address P.O. Box 390

City Calpella State CA Zip 95418 Phone (707) 485-8731

Signature Thomas E. Schuby, Timberlands Mgr Date 9-26-01

3. LICENSED TIMBER OPERATOR(S): Name Unknown at this time. Lic. No. \_\_\_\_\_

(If unknown, so state. You must notify CDF of LTO prior to start of operations)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

4. PLAN SUBMITTER(S): Name Mendocino Redwood Company, LLC

Address P.O. Box 489

City Fort Bragg State CA Zip 95437 Phone (707) 962-2800

As of January 1, 2001, I have read and understand my responsibilities as Plan Submitter as described under 14 CCR 1035. I certify that I have fulfilled my legal obligation as stated in the forest practice rules, and agree to fulfill my responsibility as the plan submitter as it pertains to this plan. (Submitter must be from 1, 2, or 3 above. He/she must sign below. Ref. Title 14 CCR 1032.7 (a))

Signature Thomas E. Schuby, Timberlands Mgr Date 9-26-01

RECEIVED

SEP 28 2001

COAST AREA OFFICE  
RESOURCE MANAGEMENT

a. List person to contact on-site who is responsible for the conduct of the operation. If unknown, so state and name must be provided for inclusion in the THP prior to start of timber operations.

Name LTO is responsible.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

b.  Yes  No Will the timber operator be employed for the construction and maintenance of roads and landings during conduct of timber operations? If no, who is responsible?

c. Who is responsible for erosion control maintenance after timber operations have ceased and until certification of the Work Completion Report? If not the LTO, then a written agreement must be provided per 14 CCR 1050 (c).

The LTO is responsible. 14 CCR 916.9 (p) Erosion control maintenance period on permanent and seasonal roads and associated landings that are not abandoned in accordance with 14 CCR 923.8 shall be three years.

6. a. Expected date of commencement of timber operations:

date of THP conformance, or  \_\_\_\_\_ (date)

b. Expected date of completion of timber operations:

3 years from date of THP conformance, or  \_\_\_\_\_ (date)

7. The timber operation will occur within the:

COAST FOREST DISTRICT  
 Southern Subdistrict of the Coast F. D.

The Tahoe Regional Planning Authority Jurisdiction  
 A County with Special Regulations, identify: \_\_\_\_\_

SOUTHERN FOREST DISTRICT  
 High use subdistrict of the Southern F. D.

Coastal Zone, no Special Treatment Area  
 Special Treatment Area(s), type and identify: \_\_\_\_\_

NORTHERN FOREST DISTRICT

Other \_\_\_\_\_

8. Location of the timber operation by legal description:

Base and Meridian:  Mount Diablo  Humboldt  San Bernardino

Section	Township	Range	Acreage	County	Assessor's Parcel Number (Optional)
<u>30</u>	<u>15N</u>	<u>16W</u>	<u>102</u>	<u>MEN</u>	_____

TOTAL ACREAGE 102 (Logging Area Only)

Planning Watershed: CALWATER Version, Identification Number, and Name: Lower Greenwood Creek (1113.610001)

USGS 7.5' Quad Elk, 1960.

9.  Yes  No Has a Timberland Conversion been submitted? If yes, list expected approval date or permit number and expiration date if already approved.

10.  Yes  No Is there an approved Sustained Yield Plan for this property? Number \_\_\_\_\_ Date app. \_\_\_\_\_

Yes  No Has a Sustained Yield Plan been submitted but not approved? Number \_\_\_\_\_ Date sub. \_\_\_\_\_

11.  Yes  No Is there a THP or NTMP on file with CDF for any portion of the plan area for which a Repon  
Satisfactory Stocking has not been issued by CDF?  
If yes, identify the THP or NTMP number(s): \_\_\_\_\_
- Yes  No Is there a contiguous even aged unit with regeneration less than five years old or less than five  
feet tall? If yes, explain. Ref. Title 14 CCR 913.1 (933.1, 953.1) (a)(4).
12.  Yes  No Is a Notice of Intent necessary for this THP?  
 Yes  No If yes, was the Notice of Intent posted as required by 14 CCR 1032.7 (g)?

13. RPF preparing the THP: Name Michael Powers RPF Number 2690  
Address P.O. Box 489  
City Fort Bragg State CA Zip 95437 Phone (707) 962-2800

- a.  Yes  No I have notified the plan submitter(s), in writing, of their responsibilities pursuant to  
14 CCR 1035 of the Forest Practice Rules.  
 Yes  No I have notified the timber owner and the timberland owner of their responsibilities for  
compliance with the Forest Practice Act and rules, specifically the stocking requirements of  
the rules and the maintenance of erosion control structures of the rules.

Copies of all plans involving MRC are filed at the company offices in Calpella and Fort Bragg, and since MRC employees are  
knowledgeable about the requirements listed under this item, no further information is provided.

- b.  Yes  No I will provide the timber operator with a copy of the portions of the approved THP as listed in  
14 CCR 1035 (e). If "no", who will provide the LTO a copy of the approved THP?

I or my supervised designee will meet with the LTO prior to commencement of operations to advise of sensitive  
conditions and provisions of the plan pursuant to 14 CCR 1035.2.

- c. I have the following authority and responsibilities for preparation and administration of the THP and timber operation.  
(Include both work completed and work remaining to be done):

The listed RPF will be the agent for MRC during the initial THP preparation and approval process. The listed RPF has  
been retained to provide professional advice throughout the timber operations. Additional work to be done by the  
RPF or his supervised designee(s) is all requirements under 1035.2, LTO prework meeting, and marking of timber.

The listed RPF shall be present, or ensure that the RPF's supervised designee is present, on the logging area at sufficient  
frequency to know the progress of operations and advise the LTO and timberland owner, but not less than once during  
the life of the plan.

- d. Additional required work requiring an RPF, which I do not have the authority or responsibility to perform:

N/A

less than five  
2001  
e. After considering the rules of the Board of Forestry and Fire Protection and the mitigation measures incorporated in this THP, I have determined that the timber operation:

- will have a significant adverse impact on the environment. (Statement of reasons for overriding considerations contained in Section III).
- will not have a significant adverse impact on the environment.

Registered Professional Forester: I certify that I, or my supervised designee, personally inspected the THP area, and this plan complies with the Forest Practice Act, the Forest Practice Rules and the Professional Foresters Law. If this is a Modified THP, I also, certify that: 1) the conditions or facts stated in 14 CCR 1051 (a) (1) - (16) exist on the THP area at the time of submission, preparation, mitigation, and analysis of the THP and no identified potential significant effects remain undisclosed; and 2) I, or my supervised designee, will meet with the LTO at the THP site, before timber operations commence, to review and discuss the contents and implementation of the Modified THP.

Signature

*Michael J. Powers*



Date

9-29-2001

SECTION II - PLAN OF TIMBER OPERATIONS

Commercial whole tree maintenance be harvested

NOTE: If a provision of this THP is proposed that is different than the standard rule, the explanation and justification should normally be included in Section III unless it is clearer and better understood as part of Section II.

14. a. Check the Silvicultural methods or treatments allowed by the rules that are to be applied under this THP. Specify the option chosen to demonstrate Maximum Sustained Production (MSP) according to 14 CCR 913 (933, 953) .11. If more than one method or treatment will be used show boundaries on map and list approximate acreage for each.

- [ ] Clearcutting \_\_\_ ac. [ ] Shelterwood Prep. Step \_\_\_ ac. [ ] Seed Tree Seed Step \_\_\_ ac.
[ ] Shelterwood Seed Step \_\_\_ ac. [ ] Seed Tree Removal Step \_\_\_ ac.
[ ] Shelterwood Removal Step \_\_\_ ac.
[X] Selection 84 ac. [X] Group Selection 18 ac. [ ] Transition \_\_\_ ac.
[ ] Commercial Thinning \_\_\_ ac. [ ] Road Right of Way \_\_\_ ac. [ ] Sanitation Salvage \_\_\_ ac.
[ ] Special Treatment Area \_\_\_ ac. [ ] Rehab. of Understocked Area \_\_\_ ac. [ ] Fuelbreak \_\_\_ ac.
[ ] Alternative \_\_\_ ac. [ ] Conversion \_\_\_ ac. [ ] Non-Timberland Area \_\_\_ ac.

Total acreage 102 ac.: Explain if total is different from that in 8. MSP option chosen: (a) [X] (b) [ ] (c) [ ]

An Option A has been submitted, and approved, for the property with THP #1-99-505 MEN. A complete copy of the Option A is available for review from MRC and CDF. (See Section V, Attachments)

b. If Selection, Group Selection, Commercial Thinning, Sanitation Salvage or Alternative methods are selected the post harvest stocking levels (differentiated by site if applicable) must be stated. Note mapping requirements of 1034 (x) (12).

Selection shall be >90 sq.ft./acre basal area for all conifers.

Group Selection shall have at least 80% of the stocked plots must meet the Basal Area stocking standards >90 sqft/acre, and not more than 20% of the stocked plots may meet stocking standards utilizing the 300 point count standard with trees that are at least 10 years old.

c. [ ] Yes [X] No Will evenage regeneration step units be larger than those specified in the rules (20 acres tractor, 30 acres cable)? If yes, provide substantial evidence that the THP contains measures to accomplish any of subsections (A) - (E) of 14 CCR 913 (933, 953) .1 (a) (2) in Section III of the THP. List below any instructions to the LTO necessary to meet (A) - (E) not found elsewhere in the THP. These units must be designated on map and listed by size.

d. Trees to be harvested or retained must be marked by or marked under the supervision of the RPF. Specify how the trees will be marked and whether harvested or retained.

Marking shall be done by the RPF and/or his supervised designee(s), using blue paint, marking a breast height mark (horizontal strip) and a stump mark (spot) for the harvest trees; using either orange or blue paint marking a breast height mark (W) and a stump mark (W) for wildlife and WLPZ permanent retention trees.

[ ] Yes [X] No Is a waiver of marking by the RPF requirement requested? If yes, how will LTO determine which trees will be harvested or retained? If yes and more than one silvicultural method, or Group Selection is to be used, how will LTO determine boundaries of different methods or groups?

e. Forest products to be harvested: Sawlogs, chiplogs, poles, split products, fuelwood, and pulpwood.

f. [X] Yes [ ] No Are group B species proposed for management?
[ ] Yes [X] No Are group B or non-indigenous A species to be used to meet stocking standards?
[ ] Yes [X] No Will group B species need to be reduced to maintain relative site occupancy of A species?

If any answer is yes, list the species, describe treatment, and provide the LTO with necessary felling and slash treatment guidance. Explain who is responsible and what additional follow-up measures of manual treatment or herbicide treatment are to be expected to maintain relative site occupancy of A species. Explain when a licensed Pest Control Advisor shall be involved in this process.

Explanation and Justification of Section II.  
THP. Specify the  
.11. If more than  
ac.  
ac.  
ac.

Commercial hardwood (Tan Oak) within the group selection areas shall be harvested and/or managed. Harvested tan oak shall be whole tree yarded from the site, in order to minimize slash build-up. Hardwood occupancy does not need to be reduced to maintain relative site occupancy or group A species. At this time it is not anticipated that the oaks will be harvested, if oaks are to be harvested a PCAA shall be amended into the plan.

g. Other instructions to LTO concerning felling operations.

As per 14 CCR 914.1, felling shall adhere to the following:

14 CCR 914.1 (a) To the fullest extent possible and with due consideration given to topography, lean of trees, landings, utility lines, local obstructions, and safety factors, trees shall be felled to lead in a direction away from watercourses.

14 CCR 914.1 (b) Desirable residual trees and tree seedlings of commercial species, and those oak trees requiring protection pursuant to 14 CCR 913.10 shall not be damaged or destroyed by felling operations, except where unavoidable due to safety factors, lean of trees, location of obstructions of roads, or lack of sufficient openings to accommodate felled trees.

14 CCR 914.1 (c) Trees shall be felled in conformance with watercourse and lake protection measures incorporated in the timber harvest plan and consistent with Article 6 of these rules.

14 CCR 914.1 (d) Felling practices shall conform to requirements of 14 CCR 919.2 to protect bird nest sites.

Fallers are advised to look up in the tree prior to falling and check for raptor nests. If a nest, or other sign is observed the faller will advise the MRC representative supervising the THP operations and leave the tree standing.

h.  Yes  No Will artificial regeneration be required to meet stocking standards?

i.  Yes  No Will site preparation be used to meet stocking standards? If yes, provide the information required for a site preparation addendum, as per 14 CCR 915.4 (935.4, 955.4).

j. If the rehabilitation method is chosen provide a regeneration plan as required by 14 CCR 913 (933, 953) .4 (b).

PESTS

15. a.  Yes  No Is this THP within an area that the Board of Forestry and Fire Protection has declared a Zone of Infestation or Infection, pursuant to PRC 4712 - 4718? If yes, identify feasible measures being taken to mitigate adverse infestation or infection impacts from the timber operation. See 14 CCR 917 (937, 957) .9 (a).

b.  Yes  No If outside a declared zone, are there any insect, disease or pest problems of significance in the THP area? If yes, describe the proposed measures to improve the health, vigor, and productivity of the stand(s).

The THP is within the Zone of Infestation for the Pine Pitch Canker, however there are no pine species within the THP area. The THP area is also within the Zone of Infestation of the Sudden Oak Death (SOD). Oaks are proposed to be harvested and or controlled, however at this time it is not anticipated that oaks will be harvested, thus a treatment may be used and in which case the oaks will remain within the THP area. The SOD has not been observed in the THP area. However if oaks are to be harvested the PCAA shall be amended into the plan.

HARVESTING PRACTICES

16. Indicate type of yarding system and equipment to be used:

- | GROUND BASED*   |  | CABLE                                   | SPECIAL |
|---|--|---|---------|
| a. <input checked="" type="checkbox"/> Tractor, including end/long lining | d. <input type="checkbox"/> Cable, ground lead | g. <input type="checkbox"/> Animal      |         |
| b. <input checked="" type="checkbox"/> Rubber tired skidder, Forwarder    | e. <input type="checkbox"/> Cable, high lead   | h. <input type="checkbox"/> Helicopter  |         |
| c. <input type="checkbox"/> Feller buncher                                | f. <input type="checkbox"/> Cable, Skyline     | i. <input type="checkbox"/> Other _____ |         |

\* All tractor operations restrictions apply to ground based equipment.